SRF - DISBURSEMENT REQUEST INFORMATION

1. Community:	CITY OF WEST LAFAYETTE	1a. SRF Loan Number:	CS 18240001	
2. Mailing Address:	609 W. Navajo Street	2a. Request No.:	ONE HUNDRED TEN	
-	West Lafayette, IN 47906			
3. Contact Person:	Judith C. Rhodes	3a. Contact Phone No.:	(765) 775-5150	
4. Community's Aut	norized Representative:	MAYOR JOHN R. DENNIS OR CLERK		TH RHODES
_	sentative's Phone No.:	(765) 775-5100		
-	rk for which claim is being made			. 4.****
•	ewer Interceptor-Construction	•		
	-			
7. Contractor	7a. Address		Amount Rec	uested
GREELEY AND HA	NISEN LOCKBOY 640776			
GREELET AND DA	NSEN LOCKBOX 619776 P.O. BOX 6197	•		
	CHICAGO, IL 606	80-6197	\$ 692.00	
O Original Loop Am	ount:		¢ 12 200 000 00	
			\$ 12,380,000.00	
10. Total Amount of	Previous Disbursements		\$ 9,936,881.00	
11. Amount of this R		\$ 692.00		
			(Amount to Contractor plus	retainage)
12. Balance Available	e after this Disbursement		\$ 2,442,427.00	
13. Is a portion of the	e claim underlying this Request:	subiect		
•	er I.C.36-1-12-14 or similar law		NO	X
14. If yes, the retains	ge amount is		\$ 0.00	
v ,	•	w and the remainder will be sent directly to the o		
Name of B	ank:			
Retainage .	Account Number:	Routing Number:		
15 IIos the Ovelifies	1 Entity maid the recover and is n	aw.		
seeking reimbur	l Entity paid the request and is n sement?	ow YES	NO	X
scoking fermour	bonnone,			
16. Is any part of this	s claim a result of a change order	r? YES	NO	X
17. Is this the final pa	ayment to the contractor?	YES	NO	X
•	•	rrect, that the claim underlying this Reques Financial Assistance Agreement with the S	_ ·	
18. DATE: JUNE 28	, 2010 18a.			
 		AUTHORIZED REPRESENTATIV	E SIGNATURE	
OA BOND		Mayor John R. Dennis		

Judith C. Rhodes, Clerk-Treasurer



100 S. Wacker Drive, Suite 1400 Chicago, Illinois 60606 p 312 558 9000 f 312 558 1986 www.greeley-hansen.com

RECEIVED

JUN 2 1 2010

UTILITY DIRECTOR

June 8, 2010

Mr. David Henderson Utility Director City of West Lafayette Wastewater Treatment Utility 500 South River Road West Lafayette, IN 47906

Subject:

Western Sanitary Sewer Interceptor Division III - Construction Services

Invoice No. 317613

Dear David:

The enclosed invoice is for services related to the Western Sanitary Sewer Interceptor—Division III in accordance with the agreement dated January 3, 2007, Amendment 1 dated March 18, 2008 and Amendment 2 dated March 24, 2009. Invoice No. 317613 covers construction inspection and construction administration services through May 28, 2010.

Please call me if you have any questions.

Thank you.

Sincerely,

JMT/img

Greeley and Hansen



For customer service, call 312 578 2375.



P.O. Box 6197 Chicago, Illinois 60680-6197 p 312 558 9000 www.greeley-hansen.com

Invoice Number:

INV-0000317613

Invoice Date:

06/08/10

Description:

FOR CONSTRUCTION SERVICES FOR THE WESTERN SANITARY SEWER INTERCEPTOR-DIVISION II IN ACCORDANCE WITH THE AGREEMENT DATED JANUARY 3, 2007 AND AMENDMENT 1 DATED MARCH 18, 2008.

To:

MR. DAVID HENDERSON CITY OF WEST LAFAYETTE 500 SOUTH RIVER ROAD WEST LAFAYETTE, IN 47906 Remit To:

GREELEY AND HANSEN

LOCKBOX 619776 P.O. BOX 6197

CHICAGO, IL 60680-6197

Customer Number:

0791

Contract Value

Project Number:

Cost:

913,600.00

07919.01

Cumulative Amount Billed:

806,491.69

WESTERN SANITARY

SWR INT CONST

Project Name:

SERVICES

Terms:

NET 30

Due Date:

07/08/2010

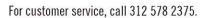
Services

05/01/10

Through: 05/28/10

			mougn.	05/28/10
		Current Amount		Cumulative Amount
Direct Labor		216.24	20 81	262,175.42
Salary Multiplier - 3.20	Office	0.00		268,923.09
Salary Mulitplier - 3.20	Field	475.73		261,604.99
Total Labor	5	691.97	-	792,703.49
Subconsultants		0.00		8,329.05
Travel		0.00		5,459.15
Printing		0.00		0.00
Miscellaneous		0.00		0.00
Invoice Total	55	691.97	_	806,491.69







P.O. Box 6197 Chicago, Illinois 60680-6197 p 312 558 9000 www.greeley-hansen.com

Invoice Number:	INV-0000315773		Project Numbe Project Name:		wr Int Constr	ruction Services	Invoice Date:	06/08/10
			Direct Labor S	upporting Sch	edule			
Group Description:			Total Labor					
Labor Cat Descr.	Employee/ Vendor	Rate		Current Hours	Rate	Current Amount	Salary Multiplier	Total
CIVIL SANITARY ASSOCIATE	TOMMY SHORT		Field Rate	4.00	54.06	216.24	3.200	691.97
Total Labor			-	4.00		216.24		691.97
						Direct Labor		216.24
						Office Indirect		0.00
						Field Indirect		475.73
		<u> </u>					-	691.97